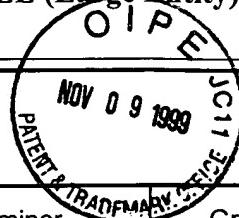


TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity)
(37 C.F.R. 1.311)

Docket No.
09389/002001

Applicant(s): **Fernando C. FRIMM et al.**



Serial No. 08/925,506	Filing Date September 8, 1997	Examiner T. Mayo	Group Art Unit 3672	Batch No. W75
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Invention: **SEMISUBMERSIBLE OFFSHORE VESSEL**

TO THE ASSISTANT COMMISSIONER FOR PATENTS

Washington, D.C. 20231

Attention: Box Issue Fees

Transmitted herewith are the following for the above-identified application.

- Issue Fee Transmittal Form PTOL-85
- Utility Fee: \$ 1210.00 Design Fee: _____ Plant Fee: _____
- A check in the amount of \$1,240.00 is attached.
- The Assistant Commissioner is hereby authorized to charge and credit Deposit Account No. 500-591 as described below. A duplicate copy of this sheet is enclosed.
- Charge the amount of
 Credit any overpayment.
 Charge any additional fee required.

Signature

Dated:

11/4/99

Jonathan P. Osha
Reg. No. 33,986
ROSENTHAL & OSHA L.L.P.
700 Louisiana, Suite 4550
Houston, Texas 77002

Telephone: (713) 228-8600
Facsimile: (713) 228-8778

CC:

I certify that this document and fee is being deposited on November 4, 1999 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Joni Hill
Signature of Person Mailing Correspondence

Toni Hill

Tony Hill
Typed or Printed Name of Person Mailing Correspondence

PART B—ISSUE FEE TRANSMITTAL

Complete and mail this form, together with applicable fees, to: Box ISSUE FEE
Assistant Commissioner for Patents
Washington, D.C. 20231

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notices of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

ALAN D. ROSENTHAL
ROSENTHAL & OSHA L.L.P.
700 LOUISIANA
SUITE 4550
HOUSTON TX 77002

RECEIVED
09/08/97

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Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

Certificate of Mailing

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

Toni Hill

(Depositor's name)

Toni Hill

(Signature)

November 4, 1999

(Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/925,506	09/08/97	023	MAYO, T	3672 08/05/99
First Named Applicant	FRIMM,	35 USC 154(b) term ext.	=	0 Days.

TITLE OF INVENTION
SEMISUBMERSIBLE OFFSHORE VESSEL

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
3 09389/002001	405-200.000	W75	UTILITY	NO	\$1210.00	11/05/99

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 ROSENTHAL & OSHA L.L.P.

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY & STATE OR COUNTRY)

Please check the appropriate assignee category indicated below (will not be printed on the patent)

individual corporation or other private group entity government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

Issue Fee
 Advance Order - # of Copies 10

4b. The following fees or deficiency in these fees should be charged to:

DEPOSIT ACCOUNT NUMBER 500-591
(ENCLOSE AN EXTRA COPY OF THIS FORM)

Issue Fee
 Advance Order - # of Copies

The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature) *JO D #33,786*

(Date) *01/14/98*

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

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